M 303110487

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED

2013 AUG -6 AM 8: 02

| 1. NAME OF COMMITTEE (in full) | (Check if name is changed) | Example: If typing, type over the lines. | 12FE4M5 | EC MAIL CENTER |
|------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| BRANDON BR | REESE F | DR GOINGRESIS | | |
| | | | | |
| ADDRESS (number and street) | 1/4328 12 | AMCHETITE RD | _1_1_1_1_1_1 | |
| (Check if address is changed) | | | | |
| | CITY A | | STATE A | ZIP CODE A |
| COMMITTEE'S E-MAIL ADDRES | SS | | | |
| (Check if address is changed) | BLREESE | GOTCONGEESS | @ YAHOO, G | DM |
| | Optional Second E-Mai | | in talah 1885. Kacamatan dari basar dari kecamatan dari kecamatan dari bermatan dari bermatan dari bermatan dari bermatan dari | |
| COMMITTEEN WED DAGE ADD | PE00 (UDL) | | | |
| COMMITTEE'S WEB PAGE ADD | • | | • | 1 |
| (Check if address is changed) | | | | |
| e History | | | . | |
| 2. DATE 0,7 2 | 9 2013 | | | |
| 3. FEC IDENTIFICATION NU | MBER ▶ C | | | |
| 4. IS THIS STATEMENT | NEW (N) OF | AMENDED (A) | | |
| I certify that I have examined thi | s Statement and to the | best of my knowledge and belief | it is true, correct and | complete. |
| | BRANDON | REX REESE | <u> </u> | |
| Signature of Treasurer | Bon S | 72 | Date 0.7 | 23 2013 |
| | | ation may subject the person signin MATION SHOULD BE REPORTED | | penalties of 2 U.S.C. §437g. |
| Office Use Only | | For further information Federal Election Commit Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 06/2012) |

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|------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | COMMITTEE |
| Car | ndidate | e Committee: |
| (a) | Y | This committee is a principal campaign committee. (Complete the candidate information below.) |
| (b) | | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) |
| | ne of didate | BRAYDON, BR, REESE, |
| | didete y Affiliati | ion GOP Office State Common Sta |
| rait | y Anniau | District |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. |
| | e of didate | |
| Par | ty Con | nmittee: |
| (d) | | This committee is a (National, State (Democratic, republican, etc.) Part |
| Pol | itical A | Action Committee (PAC): |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is |
| | | Corporation Corporation w/o Capital Stock Labor Organization |
| | | Membership Organization Trade Association Cooperative |
| | | In addition, this committee is a Lobbyist/Registrant PAC. |
| (f) | | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part committee. (i.e., nonconnected committee) |
| | | In addition, this committee is a Lobbyist/Registrant PAC. |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) |
| Joir | nt Func | draising Representative: |
| (g) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate. |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. |
| | Com | nmittees Participating in Joint Fundraiser |
| | 1. | |
| | 2. | |
| | 3. | |
| | J. | |
| | 4. | FEC ID number |

| Full Name of Treasurer | BRANDON REX REESE |
|---------------------------|-----------------------------|
| Mailing Address | V. G. 326 RAYCHETTE RD |
| | |
| | TERELL IN TO TO 1757/1811-1 |

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of

CITY

STATE ZIP CODE

Title or Position

CANDIDATE

any designated agent (e.g., assistant treasurer).

FEC Form 1 (Revised 02/2009)

LA

Telephone number

1469-1408-16056

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------|---------------------------------|--|--|--|
| Full Name of Designated Agent | | | | | | |
| Mailing Address | | | | | | |
| | " L | STATE | ZIP CODE | | | |
| Title or Position | 1 | | | | | |
| Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. | | | | | | |
| | 1110 4 0 -100 4 | <i>,</i> _ | | | | |
| Mailing Address | LIIZ M. CATHERNE, S | | | | | |
| Mailing Address | 1 | | [7. <i>5</i> .].(<i>e</i> .)]- | | | |
| Mailing Address | | | [7.5] [0] - L. J. ZIP CODE | | | |
| Name of Bank, Depository | TERELL CITY | TX | • | | | |
| Name of Bank, Depository | T, E, P, E, L, L, , , , , , , , , , , , , , , , | TX | • | | | |
| Name of Bank, Depository | T. E. R. E. L. L | TX | • | | | |
| Name of Bank, Depository | T. E. R. E. L. L | TX | • | | | |
| Name of Bank, Depository | T. E. R. E. L. L | TX | • | | | |

(7/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED